

Psychoactive substances, users and markets: recent trends (2015-2016)

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Since 1999, the Emerging Trends and New Drugs (TREND) scheme of the French Monitoring Centre for Drugs and Drug Addiction (OFDT) has been monitoring recent and emerging phenomena in the field of drug use. This edition of *Tendances* summarises the main developments marking the sixteenth year of observation conducted by the network comprising seven sites (Bordeaux, Lille, Marseille, Metz, Paris, Rennes and Toulouse) extended to Lyon in 2016.

The first part, dedicated to the changing contexts and practices relating to substance use, touches on the recreational scene, strategic venues for certain types of substance use and the development of "chemsex" among part of the gay community. The analysis then focuses on the transformations in trafficking, marked by a rise in violence and the need for traffickers to seek out users who are increasingly reluctant to frequent traditional dealing sites. Lastly, the last part of this edition deals with the substances, particularly MDMA/ecstasy and its growing success, medications containing codeine and opioids (with the emergence of first-time users among individuals without a history of illicit drug use), crack and its expanding market in and beyond the Île-de-France region, and the still somewhat limited diffusion of new psychoactive substance (NPS) use.

■ Contexts, practices and users

Continued transformation of the electronic dance music setting

The TREND investigations have repeatedly highlighted the role of the electronic dance music setting (see p. 7) in the diffusion of psychoactive substances. Hence, for example, during the 2000s, investment in the commercial dance-event setting, such as discotheques, by techno enthusiasts was accompanied by the first wave of ecstasy use in these settings. Likewise, free parties attended by young people in the rural setting contributed to the development of substance use outside of urban areas.

The transformations currently at work in the electronic dance music setting are the result of two movements. Firstly, the

**Latest data from observations
by the TREND site network
and the whole scheme**



alternative movement is experiencing a new lease of life as new generations embrace its values (freedom, independence, solidarity, etc.) and due to the increasing number of small recreational events in which substances particularly related to alternative techno culture, stimulants and hallucinogens, are in circulation [1-4]. This trend is merging with "clubber" militancy, via demonstrations for authorisation to organise parties¹ or to seek new compromises with the public authorities [5, 6]. However, this dynamic clashes with persistent tensions among the authorities and local populations, resulting in seizures of equipment or banning of events. The organisers now need to make choices between holding declared, legal parties and clandestine parties, primarily based on their ability to comply with administrative and logistical obligations rather than ideological issues.

This situation has led to a lesser difference between commercial events and alternative events, which usually attract a more underground population embracing psychotropic substance use, but which, when advertised on social media, are attended by more diverse populations.

This development is further blurring the boundaries between the alternative and commercial scenes observed since the early 2000s, while the assimilation of the electronic trend among the general recreational scene is becoming more established. The development of an

¹. Clandestine techno parties which are illegal if they attract more than 500 attendees or take place without the permission of the venue owner.

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audience with eclectic musical tastes frequenting electronic dance music events as leisure consumers, as for other music settings, generates more opportunities to discover substances. This situation is not actually new, but is tending to spread, as now suggested by practically all TREND sites. Moreover, faced with the difficulties in organising parties outdoors or in unusual settings, the organisation of events attended by traditional alternative scene enthusiasts, in halls, bar or urban clubs, in Lille, Marseille, Paris or Bordeaux for instance, is becoming more common, accelerating the links between groups whose culture is far removed from psychoactive substance use. In this way, these events seem to be extending to broader social spaces, and also more ordinary occasions. Hence, substance use, until now symbolic of the alternative scene, such as LSD, is tending to emerge in other contexts (after-work events, concerts, birthday parties, student parties, etc.) [5].

"Chemsex" and "slamming": confirmed diffusion

Psychoactive substance use (cocaine, but especially substances easily accessible via the Internet - GHB, methamphetamine) or which improve performance (such as Viagra), in the context of sexual relations ("chemsex"), by part of the gay community have been subject to specific monitoring since 2007 in Ile-de-France, although not confined to this region [6, 7]. In recent years, sexual encounters, driven by the development of the social network, have tended to become more private, moving away from traditional social settings and losing their more spontaneous character. Hence, among certain individuals, particularly "sex-seekers"² [8], the strategies for substance use are becoming increasingly elaborate, thanks to the use of specific dating sites which allow them to select their

partner(s). The latter support a genuine market, allowing each member to construct their own "plan" and to very precisely define the scenario to be played out: roles, substances used, limits, etc. [6]. The "chem plan" is thus used to arrange sexual relations during which substances which enhance sexual performance are used. At the end of the 00s, the emergence of NPS use in France, particularly the cathinones chemical class³, revived this practice. This is the context in which "slamming"⁴, i.e. injecting stimulants to enhance sensations during sex, emerged in certain European capital cities, including Paris, in the early 2010s [9].

Slamming, which had been a discreet practice in the past, tends to become more evident in other major cities monitored by TREND (Bordeaux, Toulouse, Marseille and Rennes), particularly owing to the health consequences arising from this practice, which increase the hazards and consequences of substance use. Some describe frenetic "partner" and substance use during sessions⁵ which can cover a long weekend [2-4] and lead to exhaustion. Several dozen injections can be administered over this period. As injection equipment is usually in short supply, it is reused and syringes are even shared, increasing the risk of bacteriological and viral contamination. In Paris, NPS use has very rapidly become apparent to clinical practitioners due to this user population: rapid addiction to substances or to sexual relations involving substance use; major venous damage, serious infections (endocarditis, hepatitis, etc.) [2, 3], overdose and requests for treatments following exposure to the AIDS virus. Protective measures wane over a long session. The risk of HIV/AIDS transmission appears to be further increased by the frequent combination of slamming with practices such as "bareback"⁶. According to the Paris site,

the diffusion of slamming is promoted by encounters between younger "clubbers" (18-25 year-olds) primarily using substances for recreational purposes, and older "sex-seekers" (30-50 years) who may introduce them simultaneously to NPS and injections [8]. These encounters are facilitated by the emergence of mobile phone apps with geolocation technology which allow two unknown partners to meet within moments, without even sharing more than their "profiles" [2, 6].

Although the observations suggest a growing phenomenon, it seems to be limited in scope as "chemsex" in general and "slamming" in particular have a very dissuasive image among other men who sometimes clearly state this in their profiles using the terms *no chemsex*.

■ Ever-changing trafficking

Intensified violence surrounding trafficking

Growing violence, notably related to gangland killings between traffickers at the main trafficking sites, was reported by an increasing number of sites in 2015. This phenomenon no longer only affects Marseille, which has seen an unprecedented upsurge in drug trafficking-related murders over the past twenty or so years, but also other major cities such as Lille, Rennes and Bordeaux. This phenomenon is notably manifested by the increase in seizures of heavy weapons, with reports extending beyond these three sites, in the context of narcotics deals or violence directly targeting individuals [1-5].

The violence potentially associated with drug trafficking in certain districts in major cities has led to greater reluctance among users, particularly those who are more socially integrated, to go to dealing sites. This is in addition to fear of possible arrest by the law-enforcement services, on the increase in recent years due to the police presence in priority safety zones (ZSP) created in certain districts. This situation, particularly in Paris, has been amplified by the current state of emergency following the terrorist attacks since November 2015.

Intensification of housing difficulties facing the most precarious users

In 2015, the Marseille and, especially, Toulouse sites report a particularly acute and dramatic housing and emergency accommodation crisis, whereas the Rennes and Lille coordination teams mention the lack of viable housing solutions, for a growing number of drug users, even in squats, due to repeated evictions [3-5, 10]. In Marseille and Toulouse in particular, due to loss of housing related to the economic crisis, the major influx, in 2015, of migrant families with children, and closures of squats, the 115 helpline (social and medical emergency call centre) is no longer able to keep up with demand. Homeless drug users, whether single or in a relationship but without children, particularly those aged under 25, have practically no chance of finding an emergency solution.

2. Men who have sex with other men, not or no longer frequenting the recreational setting and exclusively seeking sexual encounters [8].

3. 3-MMC, 4-MEC and MDPV are the most widely used substances in this context. Without testing, it is, in fact, difficult to identify the substance actually used, as NPS are often described using generic names, in this setting with limited expertise in terms of substance use.

4. Taken from the English verb "to slam", which means "to hit", suggesting "the hit" users can experience after injecting the stimulant.

5. Period corresponding to sexual activity.

6. Extreme-risk behaviour with regard to HIV infection, where participants do not use protection.

Traffickers continuing to "reach out"

This observation is part of a wider trend in which substances are "going to" the clients and no longer clients going to the substances. The growing reluctance among buyers to go to trafficking zones and the presence of the law-enforcement services, related to the ZSP or state of emergency, are factors which are disrupting trafficking in housing estates and on the streets [1, 6]. Traffickers are responding to this situation by adapting their practices, as observed at all TREND sites. For at least three years, certain sites such as Metz and Paris have suggested the key role of mobile phones as a trafficking instrument. Hence, the dismantling of points of sale has forced dealers to go and meet clients by making contact via text. In the Paris region, this phenomenon has taken on the form of Cocaine Call Centres where orders are placed by text and fulfilled by home delivery services. In this case, there are a number of barriers since the client contacts a partner who arranges delivery by one of the available couriers who are regularly rotated, for which the client does not have any contact details. This trafficking no longer only concerns cocaine, but affects other substances such as MDMA and especially herbal cannabis, or even crack in Paris.

In Paris, Bordeaux, Lille, Rennes and Toulouse, this reluctance by clients to frequent traditional dealing sites has prompted traffickers to organise *Drives*. These are sites which generally border a housing estate where clients can obtain supplies without leaving their vehicles. Users perceive these transactions as safer, and this organisation allows traffickers from housing estates to keep their clientele. Another phenomenon has been observed, particularly in Toulouse: a tendency to go and meet clients directly in town centres in areas until then used by street dealers. Hence, certain exits at underground stations connecting the main lines of the city have been identified as points of sale by dealers from the housing estates: *"This distribution directly connected to imports of large quantities of resin and herbal cannabis indicates that the organisations in the "districts" are no longer content to import or sell cannabis to individuals on their "housing estates", but are establishing a foothold in other parts of the regional centre"* [10].

As already highlighted in previous years [11], this development is also due to the emergence of a "marketing" dimension in a now highly competitive market. Hence, in addition to text reminders sent out to their clients, dealers in the Île-de-France and Lorraine regions would not hesitate to advertise special

offers by text: *"Up to midnight, 1 gram of white purchased, 0.2 free; 1 gram of brown purchased, 0.5 free" or "€60 per gram and €70 for 2 grams"* [1] or to send out messages using somewhat polished language until now not widely used in this context [6].

More frequent use of the dark web⁷

With the continued diversification of trafficking resources in 2015, notably with the rapid expansion of drug transit via the public or private postal route, observed at practically all TREND sites, the most rapid changes appear to concern the development of illegal drug orders placed via the dark web [2-6, 10]. This is firstly demonstrated by the growing range of substances concerned: MDMA, heroin, cocaine, amphetamine, methamphetamine, cannabis, LSD, ketamine, DMT and even Subutex (buprenorphine). NPS which are not yet classified are usually available at online stores indexed via the conventional Internet. However, although discussions and indicators point to growth, this purchasing method remains the privilege of the few. It is not only necessary to plan one's use in advance, but also to have access to computer equipment, and have basic knowledge on how to access the sales sites and perform the transaction, and to protect oneself from the risk of fraud⁸. In practice, these are isolated users, who tend to be socially integrated and far removed from the drug world, or drug dealers who are buying for other users or to deal. The recent French-speaking platforms have a more limited range than their English-speaking counterparts, focusing on conventional narcotics and a few medicinal products. Shipment of products from within the country is sometimes highlighted so as to provide reassurance as to the reliability of the transaction, as this implies the absence of border checks. Finding a delivery address which does not put them in danger remains the central concern among certain buyers [2].

Postal trafficking also concerns shipments of cocaine parcels from certain French overseas departments (Martinique, Guadeloupe and Guiana), to supply individuals or small trafficking networks, particularly in the provinces. This situation is partly related to the fact that traffickers are increasingly using these overseas departments, situated close to the production zones, as a springboard for cocaine destined for the European market [12]. Although major trafficking involves maritime routes, the growing number of micro-exports via postal channels is a factor contributing to the high availability of the substance, especially in medium-sized towns in mainland France.

Emergence of substances derived from cannabis

In 2015, the small-scale production of cannabis-derived substances in France, already reported the previous year, is more apparent: resin wax (oil), honey, etc. This emerging trend, limited for the time being to a few sites (Bordeaux, Marseille, Lille, Toulouse), is part of the wider and rapidly growing *"do it yourself"* movement. This is manifested by the interest among certain users in discussions on home-production methods and for long-standing *"recipes"*⁹ (see also p. 6). The growing range of substances containing cannabis, described in certain American states such as Colorado, having legalised cannabis use, has played a promotional role. These practices are emerging at national level, thanks to French-speaking sites directly presenting the different production techniques (Pollinator¹⁰, Ice-o-Lator¹¹) for hashish or oil (Butane Hasch Oil).

At the same time, the French market is continuing to swing towards herbal cannabis, to such an extent that the latter seems to be more readily available than the resin form at certain sites, such as Lille and Bordeaux. In 2015, herbal cannabis, in strong demand, accounts for 22% of the weight of cannabis seizures (not including the number of plants pulled up), compared to only 6% in 2013 [13]. Home-grown or commercially grown cannabis (the latter specifically destined for sale) in France is still on the rise with an increase in the size of commercial plantations reported in Aquitaine and Brittany (up to 4500 plants in a villa). At the same time, a growing dichotomy is emerging between resin users (young people, the most precarious, heavy smokers) and herbal cannabis users (often aged over 30 and more socially integrated). The intensity of competition between herbal cannabis and resin is shown by a sort of visible upselling in the variety of substances proposed and the marketing of substances with higher concentrations of THC¹², resins [14], but also herbal cannabis mainly purchased on the dark web [2] (fig. 1).

7. The dark web is the part of the deep web (non-indexed web) dedicated to illegal activities (false papers, arms and illicit drug sales etc.).

8. See reports by the Bordeaux site which has been investigating this theme in particular for several years.

9. Observation resulting from the surveillance of user forums for the I-TREND project.

10. Production of hashish from the leaves and small heads. The term "Pollinator" describes both the machine used for extraction and the dry extraction technique. The machine can be purchased on the Internet for EUR 600 or can be home made.

11. Ice-o-Lators are very simple meshes used to extract hashish with water and ice. Hashish is obtained by cooling the cannabis resin glands, known as trichomes, which harden and run in cold water, while the plant waste matter floats on the water.

12. Tetrahydrocannabinol, psychotropic molecule of cannabis.

■ Substances: main trends

MDMA and ecstasy, ever-growing diffusion

The diffusion of MDMA, in ecstasy form (tablet), powder or crystal, is continuing [11, 16, 17] both due to its broad potential availability at all types of recreational events (certain private evening events, student parties, general discotheques, bars or even public spaces transformed into party settings) and experimentation by users with less specific profiles. However, its presence is very limited on markets frequented by precarious populations.

The availability of the ecstasy form, still often restricted to free parties in 2014, increased substantially in 2015, to match, at certain sites like Lille and Metz, the powder or crystal form of MDMA with which it is in direct competition [1, 5, 6, 10]. The return of ecstasy tablets is marked by their increasing MDMA weight and content, with an unprecedented average of 125 mg per tablet in 2015 (Figure 1). Furthermore, the more sophisticated fun designs, brands and colours compared to the powder form have greater appeal among younger populations. Although certain users overlook these "details" [5], especially because *"they look different every time"* [6], *the tablets clearly appeal to others* [2, 6, 10]: *"it's the new ones, it's the Rolls Royce 2015 edition, do you see, they're not the same, they look like Nespresso and are stronger than Snapchat"* [10]. Moreover, ecstasy passes more for a new and thus attractive product, with some users being unaware that the tablets contain MDMA: *"Oh a taz, that makes a change from MD"*.

This availability, combined with the transformations of the recreational setting described above, is leading to growth of the MDMA/ecstasy population among 18-25 year-olds. Hence, several sites have mentioned the more evident visibility of users among *Lycée* students¹³. The Lille site also points out the phenomenon of "returning users", who experienced the first wave of ecstasy diffusion in their twenties and who are now rediscovering the product and are taken aback by the potency of the current tablets (Figure 1).

MDMA and ecstasy, associated with the party scene, both have a positive image, backed up by their mistaken reputation as being safe substances [11]. Numerous bad trips and cases of users feeling unwell, usually requiring simple reassurance but sometimes involving a trip to the emergency department, have nonetheless been observed. Young users become anxious about the effects of the substance, which are expected

Buprenorphine: international trafficking concerns

Organised trafficking networks, from the Paris region destined to Georgia, the Baltic States and Scandinavia, and from Lorraine to Germany have been reported since at least 2006 [15] [1]. The past two years have been marked by the increase in the number of TREND sites affected by this type of trafficking. The so-called Bulgarian channels are thus particularly active in the Bordeaux urban area, and clearly visible to the French national health insurance, owing to its impact on the quantities reimbursed. The same technique as for "mules" is used: prescriptions within the limits of doses liable to trigger checks are drawn up in the name of non-users, sometimes all members of a given family. These are replaced by others, in approximately four-month cycles, thus maintaining the number of individuals "having a prescription" at approximately two hundred. As in all major trafficking cases, this is only possible if one or more physicians and pharmacists agree to prescribe or dispense the medications [2]. The Brittany site reported trafficking of opioid substitute medications, mainly buprenorphine, targeting the Channel Islands, for the first time in 2015 [3]. In the Nord and Île-de-France regions, more individual practices are also observed, with foreigners dealing buprenorphine in their own countries [5, 6]. Lastly, the investigations conducted by the Bordeaux site on the dark web confirmed the purchase of "French pharmacy certified" buprenorphine, describing France as a reference supplier of this medicinal product [2]. Furthermore, although access to Subutex appears to be limited in the Lorraine region, its prescribing restrictions in Germany have led some citizens of this bordering country to seek prescriptions in France. This is not trafficking in this case, although the Lorraine site nonetheless reports that these prescriptions also supply black markets on the borders [1].

but sometimes too strong, or which are unexpected. Between 2014 and 2015, users applied harm reduction measures more effectively, sooner rather than later depending on the sites, and tablets are now usually taken after being divided. Users start by taking half or a quarter tablet (doses still far too high for them) or share one tablet between several users. MDMA is increasingly used in small repeated doses during the evening to reduce harm, and sometimes diluted in a shared bottle, thereby limiting the individual doses.

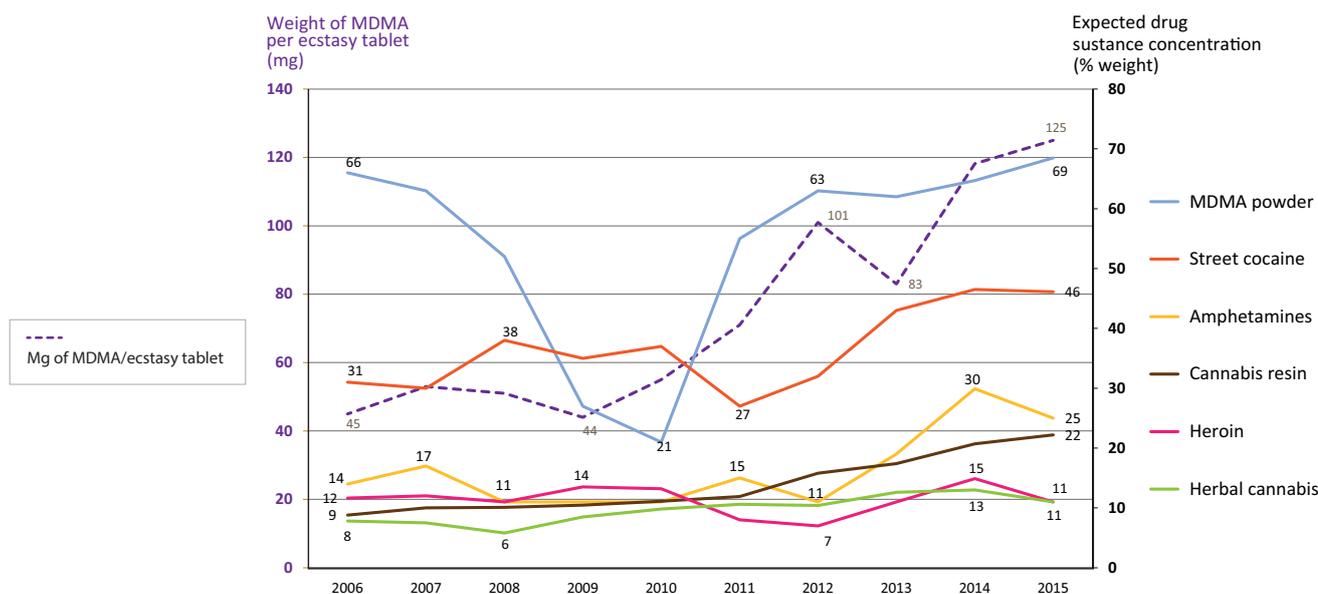
Negative effects related to excessively regular use have nonetheless appeared, particularly among *Lycée* students [2-4, 10]. At the TREND sites in Bordeaux, Marseille, Rennes and Toulouse, physicians at Youth Addiction Outpatient Clinics (CJC), workers in the school setting or even former users report depressive and anxiety disorders, together with a decline in school results related to weekly or, indeed, more frequent use: *"Even so, you feel so depressed every Wednesday, and even when you're depressed, it wears you out, you're completely physically shattered..."* (a substance user from Toulouse) [10]. The absence (or rare nature) of addiction, particularly based on the opioid model with daily use, is said to have delayed awareness of the problem.

Internet and new substances

In 2015, approximately 50 new substances were identified in France for the first time; however, the circulation of NPS, observed via TREND, still seems marginal and diverse according to the sites and spaces observed. The difficulty in defining the phenomenon partly results from the diversity of the user groups and *modus operandi* (Internet). The substances or spaces specific to substance use vary according to the sites, except for 3-MMC and 4-MEC, confirming the major role of these two cathinones in France. This observation confirms the findings observed in the past three years through online discussion forums and seizures or checks carried out by the law enforcement services [18]. Use of these two agents in the context of chemsex practices has been reported at practically all sites (see p. 2). Outside this highly targeted group, there are few local situations in which clear patterns of use have been established.

¹³ Observation which should, however, be confirmed by quantitative data. The "lycée years" correspond to the last three years of secondary school, from "seconde" to "terminale", which would be the equivalent of years 12 and 13 of Sixth Form College in the UK and grade 10 through to grade 12 of High School in the United States.

Figure 1 - Changes in the mean purity of the main illegal substances in circulation (right axis) and mean quantity of MDMA per ecstasy tablet (left axis)



Source: data from the Institut national de police scientifique (French National Forensic Science Institute, INPS)

The quantity of MDMA per tablet (purple dotted line, left axis) is continuing its rapidly ascending curve, whereas the purity of the MDMA powder is also continuing to increase. For the other substances (right axis), in 2015, a slight drop in the growth of the mean concentrations was observed, except for cannabis resin, which has accelerated continuously since 2011.

The Bordeaux site is an exception, with substance use developing among precarious young users in urban areas and injection use. The other sites have noted that the populations attending support centres for the reduction of drug-related harms (CAARUD) do not seem greatly concerned, although injection of NPS has also been reported in Metz. Although NPS use is not widely observed at local level in the usual spaces studied by TREND, clinical reports from centres for evaluation and information on pharmacodependence (CEIP), healthcare professionals or via SINTES data collection confirm the local presence of NPS among well-integrated and less visible populations.

In contrast, the use of psychedelic NPS, sold as substitutes for LSD (25x-NBOMe, 2C-x, 1p-LSD, etc.) or ketamine (methoxetamine) in the alternative recreational setting appears to have levelled off, continuing the trend initiated by methoxetamine the previous year. Despite very local indications, mainly on growth in eastern France, users encountered in the alternative recreational setting appear rather to be rejecting these substances. The circulation of health alerts, evidence of fraud, together with aggression observed during bad trips, or the very real difficulty of remembering the names of substances have led users to view NPS with some suspicion¹⁴. The commercial

dance-event setting does not appear to have been an actual site for intentional NPS use this year, despite playing a particularly important role in the past [11]. The organised sale of NPS outside the Internet has not become established, except for supply networks specific to the *chemsex seeker* community (see p. 2) and at the Bordeaux site where street trafficking of stimulant NPS has gained more of a foothold in the past two years. In 2015 and 2016, feedback from three signals, one via the hospitalisation of a group of young people in Annecy, and the other two in Paris and Metz, made it possible to identify street sales of synthetic cannabinoids.

On the fringes of these main lines, some feedback, mainly from seizures and checks by the law-enforcement services, SINTES data collection, observations from forums and health signals, points to the emergence of isolated lifetime use of benzodiazepines or synthetic opioids without marketing authorisation in France.

Aside from NPS, the Internet plays a driving role in the diffusion of known substances or practices. Rediscovery of these substances/practices, as shown by unusual requests for non-prescription medicines in pharmacies, mainly affect younger users (see below). Users in the recreational setting appear to be rediscovering substances having a more

natural image. This is particularly the case for DMT (or methyltryptamine), already observed on a smaller scale, but which was identified at practically all TREND sites in 2016. Its revival is reminiscent of the early 00s when the scheme noted the use of psychotropic plants in the recreational setting, as part of a "new age" style trend [19].

Misuse of medications, growing visibility

Increased diversion of opioids and codeine products by non-drug users

An increase in diversion practices concerning codeine medications (Neo-codion, CoDoliprane, etc.), strong opioids (fentanyl, oxycodone, etc.) or weaker opioids (tramadol) among individuals who are a priori not drug users (except for cannabis which may be observed) and have never used heroin or opioid substitute medications, has been observed over the past few years. This primarily concerns individuals who have become addicted following analgesic treatments at therapeutic doses, for chronic painful conditions or further to surgery. While these situations

14. Users believe they are taking another substance.

Table 1 - Prices in euros of the main substances as observed by the TREND scheme (price for 1 gramme, unless stated otherwise)

	2000	2010	2011*	2012*	2013*	2014**	2015**	General trend
Heroin	59	42	40	43	47	43	40	↓ since 2013
Cocaine	84	67	68	71	77	80	84	↗ since 2010
Ecstasy (tablets)	15	7.7	7	10	8	10	10	↗ since 2013
MDMA (powder)	NA	60	63	56	55	55	54	↓ since 2010
Cannabis resin	NA	5	5	7	7	7	7	↗ since 2010
Herbal cannabis	NA	8	8	10	10	10	11	↗ since 2010
Amphetamines	15	16	15	14	14	15	13	→ since 2012
LSD (blotter)	8.5	10	10	10	10	10	10	→ since 2010

Source: Price Barometer/TREND, OFDT

* TREND data from the half-yearly "prices" Barometer for heroin, cocaine, a tablet of ecstasy or MDMA, cannabis resin and herbal cannabis. The data on price per gram of amphetamines and per LSD blotter come from the TREND ethnographic observations.

** TREND ethnographic data

NA: data not available

have always existed, the new aspect is the proliferation of cases referred to specialised drug treatment centres for opioid substitute treatment [2-5, 20]. These individuals do not fit a unique profile, but are often adults aged 30 to 70, with a higher proportion of women compared to drug users attending these counselling facilities. They go to multiple pharmacies to avoid notice, or obtain multiple prescriptions¹⁵. As for polydrug users, physicians regularly face difficulties when treating pain among patients already used to high doses of opioids, and management of their addiction comes up against persistent complaints related to pain. Overdose, sometimes fatal, are reported, particularly by the CEIP. However, this phenomenon is incommensurable with the situation observed in the United States in recent years, a proper addiction "epidemic" resulting from the use of opioid medications.

Although pharmacists are also reporting unusual purchases by adolescents or students (Rennes, Bordeaux), these mainly correspond to the recreational use of codeine products, potentially replaced by dextromethorphan, in a recreational context or simply in the street. Sometimes combined with antihistamines, these are diluted in a soda to create a drink known as *purple drank* [6, 11, 21], for which the long-standing recipe has been re-distributed via the Internet. In 2015, reports concerning frequent sales or sales in large quantities dramatically increased, particularly around the Aquitaine site which also indicates emergency admissions. These practices have also been reported by CJC [4].

Polydrug users, however, use these medications to a limited extent, insofar as they are more familiar with opioid substitute medications and morphine sulphate. However, codeine products are still used by a few opioid addicts as supplements to combat withdrawal and are said to be marginally used, according to the Paris site, to alleviate coming down¹⁶ from stimulants. Nevertheless, there have been reports concerning tramadol, oxycodone, and above all fentanyl, the rapid effect of which is conducive to diversion. Practices for recovering fentanyl available in the form of skin patches (to allow gradual transdermal diffusion), reported in Marseille, appear to remain largely marginal.

Precarious polydrug users and medications: from necessity to choice

For several years, ethnographic and professional observers have reported an increasing number of precarious users switching to medication use, particularly opioids [11]. The growing financial vulnerability among certain populations, related to the current economic crisis, is a clear factor contributing to this phenomenon [2, 4, 5]. The Bordeaux and Rennes sites also point to a more cultural phenomenon: preference among certain young drug users, unfamiliar with heroin, for medications such as Skenan, Subutex but also benzodiazepines, which are apparently no longer taken automatically but by choice: "...We're the tablet generation. I'm 29 and see young people who've never taken heroin; it's all about sken, sub, valium, Seresta, benzo, especially benzo; they don't start on junk, they start

on sken [2]". Medications, which are moreover perceived as a "cleaner" product (fixed dose, packaging), give rise to practices with almost greater prestige: "At the moment we're doing cocktails; you mix Skenan, Stilnox and Valium for injection... and then you inhale from the same pump". Paris and, above all, Toulouse also report the greater visibility of first-time buprenorphine or even methadone users.

Deaths related to methadone: the causal role of snorting?

Although the Metz site reported an increase in the number of overdose deaths perceived by professionals in 2015, without any further information on the substances implicated, the Rennes, Lille, Bordeaux and Toulouse sites particularly highlighted deaths due to methadone [1-3, 5, 10]. This is not a judgement on an uncertain quantitative development¹⁷, but rather an overview of a few cases that came to light, highlighting certain recurrences.

The first is the implication of methadone capsules, snorted in several cases of death [2, 5]. Snorting of methadone present in capsules was reported in 2015 by four TREND sites: Rennes, Bordeaux, Lille and Marseille, although this practice still remains rare. This pharmaceutical form is still fairly

15. Multiple prescriptions are obtained by consulting several different physicians (and also using different pharmacies) to procure larger quantities of a medicinal product.

16. Effects, generally of a depressive nature, accompanying the fall in substance concentrations in the blood.

17. Methadone, alone or in combination, according to the latest available DRAMES data (2014), has the highest responsibility for deaths reported in this context, concerning 44% of cases.

limited on the black market, although the Bordeaux site nonetheless claimed to have found "empty packs of methadone capsules very frequently in the streets and around unauthorised injection sites in the town, over this period." [2].

Furthermore, the Bordeaux and Rennes sites draw attention to methadone-related deaths of individuals having never previously taken opioids [2, 3].

Mainly occurring in a recreational setting, these are apparently accidental deaths, affecting users having taken the substance without paying attention to what it was. In Bordeaux, methadone taken from capsules is also said to have been sold as cocaine [2].

Lastly, more conventionally, the frequency of deaths is noted in relation to non-therapeutic use (individuals

not treated for addiction by the health care system, self-substitution), in conjunction with concomitant alcohol and benzodiazepine use. Although methadone sales are part of a small-scale client/dealer market, it is nonetheless sufficient to allow a portion of drug addicts to self-substitute [1, 3, 5, 10]. The black market does not show clear signs of expansion, even though the observations in Lille and Metz could suggest otherwise. Certain misunderstanding of the risks, both among certain drug users and naïve subjects, is observed in the cases described.

Dispersal of crack in Île-de-France

The 2015 closure of a large crack dealing site in a housing estate in the 19th arrondissement, combined with the strong police presence which disrupted trafficking in the Stalingrad district since the ZSP was set in place, has led to dispersed trafficking in Paris. In 2015, dealing activities moved inside the Paris underground, particularly on lines 4, 9, 12 and 14. Trafficking takes place in the corridors, but also on certain trains. However, this extension does not only appear to be the result of disruptions in supply, but also stems from the increased demand related to the sociological diversification of users. In recent years, while the TREND scheme evidenced the presence of a socially integrated user clientele, the Paris site particularly highlights the greater visibility of users among Eastern European migrants who inject crack. This increase in demand appears to correspond to a dramatic rise in the distribution of "crack kits" by associations (23,000 in 2015 for the Gaïa association, i.e. double compared to 2012) [6].

This relative spread of crack is not limited to inner Paris. The Paris coordination team describes the emergence of dealing sites in the Seine-Saint-Denis department, whereas the regional press has reported the creation of a major point of sale in a social housing estate in Compiègne, Oise, an industrial department greatly affected by social instability. The clientele is said to consist of precarious users, mainly on heroin, but who are turning away from it due to very low concentrations. In this case, crack producers from Seine-Saint-Denis appear to have found new outlets after the closure of the Paris point of sale¹⁸.

The building blocks of the TREND scheme

TREND relies first and foremost on a network of eight local coordinating sites (Bordeaux, Lille, Lyon, Marseille, Metz, Paris, Rennes, Toulouse) with a common information collection and analysis strategy. The data collection tools used are mainly qualitative: continuous ethnographic observations conducted in urban areas and on the party scene, qualitative questionnaires are administered to structures or associations in contact with drug users (CAARUDs), focus groups ("health", "law enforcement") that aim to rapidly establish overviews of the situation with professionals in the field.

The following data collection methods were used: media monitoring, interviews, etc. The data analysis is based on a table and shared coding procedure for qualitative material collected using the Nvivo software program.

Against this background, thematic investigations are also conducted to acquire more information about a particular subject and retail selling prices of the main illegal drugs are regularly collected.

TREND also relies on:

- SINTES (National Detection System of Drugs and Toxic Substances), an observation system geared towards detecting and analysing the toxicological composition of illegal substances;
- I-TREND (Internet tools for research in Europe on new drugs), monitoring scheme targeting virtual spaces and NPS, developed in 2010. This scheme particularly includes quantitative and qualitative monitoring of user forums (indicator of user interest), and analysis of online supply targeting the French market
- recurrent quantitative surveys, such as the ENa-CAARUD survey (national survey of CAARUDs' clients) conducted among drug users seen in French low-threshold structures certified as CAARUDs (Support Centre for the Reduction of Drug-related Harms);
- the qualitative elements mentioned by CAARUDs in their activity reports;
- the use of the results of information systems supervised by the CEIP network (Centre for Evaluation and Information on Pharmacodependence) and the ANSM (National Agency for Medicines and Health Products Safety), the OCRTIS (Central Office for the Repression of Drug-related Offences) and the INPS (National Forensic Science Institute) and finally, other OFDT surveys.

The urban settings defined by TREND primarily refers to low-threshold harm reduction centres ("drop ins", needle exchange programmes that became CAARUDs in 2006) and open spaces (e.g., streets, squats and dealing sites). Most of the people encountered in these settings are problem users of illegal drugs living in highly precarious conditions.

Techno party settings refer to places where events are organised around this music. They encompass the so-called "alternative" scene (free parties, "teknivals", alternative party areas within more general festivals) as well as commercial or more conventional locations (clubs, discotheques, private parties). This setting now tends to cover the party scene in general, in line with the spread/dilution of the techno movement into the more general population.

18. <http://www.leparisien.fr/compiègne-60200/le-crack-nouveau-fleau-des-rues-de-compiègne-20-12-2015-5389753.php> [last accessed on 07/04/2017].

■ Conclusion

The changes observed in 2015 and in early 2016 mainly reflect adjusted or intensified trends already at work [11]. Not all concern drug users in the same way. Hence, the different changes in drug supply structures seem to highlight a certain social divide between users in terms of access to substances. On the one hand, more socially integrated and economically well-off users avoid dependence on street or housing estate trafficking via self-production practices, or online orders followed by postal deliveries. They are increasingly the focus of competitive trafficking, which protects them from violence on the rise elsewhere.

This new accessibility to substances has undoubtedly contributed to the spread of certain types of lifetime use, such as MDMA, to users with more diverse profiles than before, or to the development of problem use practices, such as chemsex. The most precarious drug users are experiencing increasingly difficult living conditions. The growing divide between supply and increasing need, partly resulting from the economic crisis, has led to reduced access to support, notably in terms of counselling and accommodation. It is nonetheless accepted that inadequate hygiene conditions reduce or, indeed, cancel out the effectiveness of the somatic care required and that meeting primary needs is a prerequisite to managing drug use. These users deprived of Internet access or mobile phone contact with dealers are facing increasingly difficult access to the substance market and are adapting their drug use accordingly (medications and crack).

Despite the diverse themes examined, this analysis does not, however, sum up all of the changes observed and struggles to reflect all of the qualitative data accumulated by the TREND scheme. Hence, in 2017, several themes will be examined in greater detail in specific publications. To start with, this will involve reviewing the changes in the alternative recreational setting, substance use practices specific to the gay community, substance use among new migrants, trafficking via the dark web, but also substances and molecules: LSD, buprenorphine and NPS as a whole.

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